Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF CALIFORNIA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Gerald First name Lee Middle name Lowery Last name and Suffix (Sr., Jr., II, III)	Linda First name Kay Middle name Lowery Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6434	xxx-xx-6177

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Case number (if known)

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have ☐ I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years **DBA JL Repair and Home Improvement** DBA Linda's Hair & Nails & Reflexology Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 11834 Lakeside Ave Lakeside, CA 92040 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code San Diego County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Check one: Check one: Why you are choosing this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Debtor 1

Debtor 2

Gerald Lee Lowery

Linda Kay Lowery

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	Debtor 1 Gerald Lee Lowery Debtor 2 Linda Kay Lowery				Case number (if known)		
Par	t 2: Tell the Court About Y	∕our Bank	ruptcy C	ase			
7.	The chapter of the Bankruptcy Code you are	Check on (Form 20	e. (For a 10)). Also	brief description of each, see N	otice Required	d by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy priate box.	
	choosing to file under	☐ Chapt	er 7				
		☐ Chapt	er 11				
		☐ Chapt	er 12				
		■ Chapt	er 13				
8.	How you will pay the fee	abo ord a p	out how yer. If your re-printed	ou may pay. Typically, if you are r attorney is submitting your pay d address.	e paying the feoment on your l	check with the clerk's office in your local court for more details the yourself, you may pay with cash, cashier's check, or mone behalf, your attorney may pay with a credit card or check with	y
				ly the fee in installments. If yo lee in Installments (Official Form		option, sign and attach the Application for Individuals to Pay	
		☐ I re but app	quest the	at my fee be waived (You may quired to, waive your fee, and mour family size and you are unab	request this or lay do so only i le to pay the fe	ption only if you are filing for Chapter 7. By law, a judge may if your income is less than 150% of the official poverty line the ee in installments). If you choose this option, you must fill out Official Form 103B) and file it with your petition.	at
9.	Have you filed for bankruptcy within the last 8 years?	■ No. □ Yes.	District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to	line 12.			
	residence:	☐ Yes.	Has y	our landlord obtained an evictio	n judgment aga	ainst you?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.	About an Evicti	tion Judgment Against You (Form 101A) and file it as part of	

Filed 07/13/18 Entered 07/13/18 16:28:51 Case 18-04175-LT13 Doc 1 Pg. 4 of 68 Debtor 1 Gerald Lee Lowery Debtor 2 Linda Kay Lowery Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ☐ No. Go to Part 4. of any full- or part-time business? Name and location of business Yes. A sole proprietorship is a business you operate as See Attachment an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a Number, Street, City, State & ZIP Code separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No.

property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Deb	tor 2 Linda Kay Lowery	'				Case number (if known)
Part	5: Explain Your Efforts t	to Rec	eive a Briefing About Credit Counseling			
		Abo	ut Debtor 1:		Abo	out Debtor 2 (Spouse Only in a Joint Case):
15.	Tell the court whether you have received a briefing about credit counseling. The law requires that you		I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.		You	I must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
	receive a briefing about credit counseling before		Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.			Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
You one choic so, y file. If yo can will le you cred	you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to	_	I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.			I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
	If you file anyway, the court can dismiss your case, you		Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.			Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
	will lose whatever filing fee you paid, and your creditors can begin collection activities again.	_	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.			I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.
			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.			To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case. Your case may be dismissed if the court is dissatisfied
			Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted			with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.
			only for cause and is limited to a maximum of 15 days.		_	
			I am not required to receive a briefing about credit counseling because of:			I am not required to receive a briefing about credit counseling because of:
			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.			Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
			Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after reasonably tried to do so.			☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
			Active duty. I am currently on active military duty in a military combat zone.			Active duty. I am currently on active military duty in a military combat zone.
			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.			If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 Gerald Lee Lower tor 2 Linda Kay Lowery				Case number (if known)			
Part	6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) a individual primarily for a personal, family, or household purpose."					
			■ No. Go to line 16b.					
			☐ Yes. Go to line 17.					
		16b.	Are your debts primarily money for a business or in	ts that you incurred to obtain usiness or investment.				
			☐ No. Go to line 16c.	☐ No. Go to line 16c.				
			■ Yes. Go to line 17.					
		16c.	State the type of debts you	u owe that are not consu	mer debts or busir	ess debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chap	m not filing under Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	☐ Yes.	I am filing under Chapter 7 are paid that funds will be			operty is excluded and administrative rs?	expenses	
	administrative expenses are paid that funds will		□ No					
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000		2 5,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		□ 50,001-100,000		
		☐ 100-1 ☐ 200-9		☐ 10,001-25,0	100	☐ More than100,000		
19.	How much do you	□ \$0 - \$		□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,001 - \$100,000		□ \$10,000,00°		□ \$1,000,000,001 - \$10 billi		
		□ \$100,001 - \$500,000 ■ \$500,001 - \$1 million			1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 bil☐ More than \$50 billion	ilion	
20.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,00°		\$1,000,000,001 - \$10 bill		
		_	001 - \$500,000 001 - \$1 million	□ \$50,000,00 ⁻ □ \$100,000,00	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 bi ☐ More than \$50 billion	IIIION	
		— 4000,			·	·		
Part								
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
						le, under Chapter 7, 11,12, or 13 of ti choose to proceed under Chapter 7.		
			rney represents me and I di nt, I have obtained and read			not an attorney to help me fill out this	;	
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I underst bankrupt and 357	cy case can result in fines u	ent, concealing property, up to \$250,000, or impriso	or obtaining mone onment for up to 2	y or property by fraud in connection w 0 years, or both. 18 U.S.C. §§ 152, 13	vith a 341, 1519,	
		/s/ Gera	ald Lee Lowery		/s/ Linda Kay			
			Lee Lowery e of Debtor 1		Linda Kay Lov Signature of Deb			
		Executed	d on June 30, 2018 MM / DD / YYYY		Executed on J	une 30, 2018 MM / DD / YYYY		

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	Case number (if known)			
under Chapter 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also certify that I h	tes Code, and have e ave delivered to the o	explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
/s/ Brian A. Kretsch	Date	June 30, 2018 MM / DD / YYYY		
Brian A. Kretsch 159240 Printed name Law Office of Brian A. Kretsch, APC Firm name 810 Jamacha Road, Suite 202 El Cajon, CA 92019 Number, Street, City, State & ZIP Code Contact phone 619-696-6629 159240 CA	_ Email address	brikretsch@sbcglobal.net		
ľ	under Chapter 7, 11, 12, or 13 of title 11, United Sta for which the person is eligible. I also certify that I h and, in a case in which § 707(b)(4)(D) applies, certif schedules filed with the petition is incorrect. /s/ Brian A. Kretsch Signature of Attorney for Debtor Brian A. Kretsch 159240 Printed name Law Office of Brian A. Kretsch, APC Firm name 810 Jamacha Road, Suite 202 El Cajon, CA 92019 Number, Street, City, State & ZIP Code Contact phone 619-696-6629	I, the attorney for the debtor(s) named in this petition, declare that I have under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have efor which the person is eligible. I also certify that I have delivered to the cand, in a case in which § 707(b)(4)(D) applies, certify that I have no know schedules filed with the petition is incorrect. Is/ Brian A. Kretsch Date Brian A. Kretsch 159240 Printed name Law Office of Brian A. Kretsch, APC Firm name 810 Jamacha Road, Suite 202 EI Cajon, CA 92019 Number, Street, City, State & ZIP Code Contact phone 619-696-6629 Email address 159240 CA		

Debtor 1 Gerald Lee Lowery Debtor 2 Linda Kay Lowery Case number (if known) Fill in this information to identify your case: Debtor 1 **Gerald Lee Lowery** Middle Name Last Name Debtor 2 **Linda Kay Lowery** (Spouse if, filing) Middle Name SOUTHERN DISTRICT OF CALIFORNIA United States Bankruptcy Court for the: Case number ☐ Check if this is an (if known) amended filing **FORM 101. VOLUNTARY PETITION ATTACHMENT** Additional Sole Proprietorship(s) Linda's Hair & Nails & Reflexology Name of business, if any 124 Lomas Santa Fe Ave Solana Beach, CA 92075 Number, Street, City, State & ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above JL Repairs & Home Improvement Name of business, if any 11834 Lakeside Ave Lakeside, CA 92040 Number, Street, City, State & ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6))

None of the above

Fill	in this inform	nation to identify your ca	ise:			
Deb	otor 1	Gerald Lee Lowery				
Dok	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	Linda Kay Lowery First Name	Middle Name	Last Name		
Uni	ted States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA		
Cas	se number					
(if kn	nown)				_	k if this is an
					amen	ded filing
		m 106Sum				
				nd Certain Statistical Information		12/15
				e are filing together, both are equally responsible ne information on this form. If you are filing ame		
youi	r original forn	ns, you must fill out a ne	w Summary and check	k the box at the top of this page.		
Par	t 1: Summa	arize Your Assets				
					Your a	ssets
					Value of	of what you own
1.		B: Property (Official Fore 55, Total real estate, from			\$	490,000.00
	1b. Copy line	e 62, Total personal prope	erty, from Schedule A/B		. \$	53,783.00
	1c. Copy line	e 63, Total of all property	on Schedule A/B		\$	543,783.00
Par	t 2: Summa	arize Your Liabilities				
					Your li	iabilities
						nt you owe
2.		Creditors Who Have Clair total you listed in Column		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D.	\$	518,717.00
3.		F: Creditors Who Have Une total claims from Part 1		al Form 106E/F) as) from line 6e of <i>Schedule E/F</i>	. \$	33,000.00
	3b. Copy the	e total claims from Part 2	(nonpriority unsecured c	claims) from line 6j of Schedule E/F	. \$	26,937.00
				Your total liabilitie	s \$	578,654.00
Dom	4.2.					
Par	Summa	arize Your Income and E	xpenses			
4.		Your Income (Official Form ombined monthly income		e I	\$	8,725.00
5.	Schedule J: Copy your m	Your Expenses (Official Foundation on the Contract of States on the Contract of States	orm 106J) 22c of <i>Schedule J</i>		\$	7,155.00
Par	t 4: Answe	r These Questions for A	dministrative and Stati	istical Records		
6.	-	ng for bankruptcy under u have nothing to report o	•	heck this box and submit this form to the court with	your other sc	hedules.
7.	YesWhat kind of	f debt do you have?				

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Debtor 2	Gerald Lee Lowery Linda Kay Lowery	Case number (if known)	
	om the Statement of Your Current Monthly Income: Copy your total curre A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	nt monthly income from Official Form	\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	33,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	33,000.00

				_	
Fill in this infor	mation to identify your case and	this filing:			
Debtor 1	Gerald Lee Lowery				
Debter 1		dle Name Last Name			
Debtor 2	Linda Kay Lowery				
(Spouse, if filing)	First Name Mic	dle Name Last Name			
United States Ba	ankruptcy Court for the: SOUTHE	RN DISTRICT OF CALIFORNIA			
Case number				☐ Check if this is an amended filing	
	orm 106A/B le A/B: Property			12/15	
think it fits best. I information. If mo Answer every que	Be as complete and accurate as poss re space is needed, attach a separate stion.	st an asset only once. If an asset fits in more than one ible. If two married people are filing together, both are sheet to this form. On the top of any additional pages Other Real Estate You Own or Have an Interest In	equally responsible for s	upplying correct	
■ Yes. Where	is the property?	What is the property? Check all that apply			
11834 La	keside Ave.	■ Single-family home	Do not deduct secured of	laims or exemptions. Put	
Street address	, if available, or other description	Duplex or multi-unit building Condominium or cooperative	the amount of any secur Creditors Who Have Cla	d claims on Schedule D:	
Lakeside	CA 92040-0000	Manufactured or mobile home	Current value of the	Current value of the	
		Land Investment property	entire property? \$490,000.00	portion you own? \$490,000.00	
City State ZIP Code		☐ Timeshare ☐ Other	Describe the nature of (such as fee simple, te	your ownership interest nancy by the entireties, or	
		Who has an interest in the property? Check one Debtor 1 only	a life estate), if known. Fee simple		
San Dieg	0	Debtor 2 only			
County		■ Debtor 1 and Debtor 2 only	Check if this is co	mmunity property	
		At least one of the debtors and another Other information you wish to add about this item property identification number:	(see instructions) m, such as local		
		for all of your entries from Part 1, including any at number here		\$490,000.00	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debtor 1 Gerald Lee Lowery Debtor 2 Linda Kay Lowery		Case number (if known)			
Car □ N	,	trucks, tractors, sport utility ve	hicles, motorcycles		
■ Y	'es				
3.1	Make:	Chevrolet	Who has an interest in the property? Check one	the amount of any secur	laims or exemptions. Put ed claims on Schedule D:
	Model: Year:	Silverado 2016	☐ Debtor 1 only ☐ Debtor 2 only	Creditors Who Have Cla	ims Secured by Property. Current value of the
	• •	nate mileage: 13500 formation:	■ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
			Check if this is community property (see instructions)	\$28,681.00	\$28,681.00
3.2	Make:	Chevrolet	Who has an interest in the property? Check one		laims or exemptions. Put ed claims on Schedule D:
	Model:	Express Cargo Van	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
	Year:	2000 nate mileage: 185000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the	Current value of the
F	• •	nate mileage: 185000 formation:	■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	entire property?	portion you own?
			■ Check if this is community property (see instructions)	\$1,851.00	\$1,851.00
3.3	Make: Model:	Ford Fusion	Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any secur	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	Year:	2010	☐ Debtor 2 only	Current value of the	Current value of the
	• • •	nate mileage: 169000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Γ	Other inf	formation:	At least one of the debtors and another		
			Check if this is community property (see instructions)	\$3,451.00	\$3,451.00
	<i>mples:</i> B lo		nd other recreational vehicles, other vehicles, tercraft, fishing vessels, snowmobiles, motorcyc		
			n for all of your entries from Part 2, including that number here		\$33,983.00
art 3:	Descri	be Your Personal and Household It	ems		
o yo	ou own o	or have any legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
Exa	amples: No	goods and furnishings Major appliances, furniture, linens	, china, kitchenware		
	Yes. De	scribe			
		Furniture and h	ousehold items		\$2,000.0

Official Form 106A/B Schedule A/B: Property page 2

Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

Official Form 106A/B Schedule A/B: Property page 3

Case 18-04175-LT13 Filed 07/13/18 Entered 07/13/18 16:28:51 Doc 1 Pg. 14 of 68 **Gerald Lee Lowery** Debtor 1 Debtor 2 Linda Kay Lowery Case number (if known) 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Chase #8363 \$1,800.00 17.1. Checking Wells fargo #3653 \$1,000.00 17.2. Checking Chase #0805 \$500.00 17.3. Checking Chase #2350 \$1,800.00 17.4. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... 2

	Name of entity:	% of ownership:	
20.	Government and corporate bonds and other negotia Negotiable instruments include personal checks, cashie Non-negotiable instruments are those you cannot trans	niers' checks, promissory notes, and money orders.	
	■ No		
	☐ Yes. Give specific information about them		
	Issuer name:		
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403	03(b), thrift savings accounts, or other pension or profit-sharing plans	
	■ No		
	☐ Yes. List each account separately. Type of account:	Institution name:	
	Type of account.	institution name.	
	Security deposits and prepayments Your share of all unused deposits you have made so th Examples: Agreements with landlords, prepaid rent, pu No	that you may continue service or use from a company ublic utilities (electric, gas, water), telecommunications companies, or others	
	☐ Yes	Institution name or individual:	
23.	Annuities (A contract for a periodic payment of money	y to you, either for life or for a number of years)	
	■ No		
	☐ Yes Issuer name and description.		
	Interests in an education IRA, in an account in a qua 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	alified ABLE program, or under a qualified state tuition program.	
		Separately file the records of any interests.11 U.S.C. § 521(c):	
05	Trusts aquitable or future interests in property (eth	her than anything listed in line 1), and rights or powers exercisable for yo	r
	■ No	ther than anything listed in line 1), and rights of powers exercisable for yo	Jui
	☐ Yes. Give specific information about them		
~~~	icial Form 106A/D	Cabadida A/D Draparti	

Official Form 106A/B Schedule A/B: Property page 4

benefit

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim........ 35. Any financial assets you did not already list No Official Form 106A/B Schedule A/B: Property page 5 Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com Best Case Bankruptcy

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....

\$1,000.00

☐ Yes. Give specific information.......

Debt Debt		Gerald Lee Lowery Linda Kay Lowery		Case number (if known)	
Part (	6: Des	scribe Any Farm- and Commercial Fishing-Related Property You O ou own or have an interest in farmland, list it in Part 1.	wn or Have an Intere	st In.	
46. <b>C</b>	o you	own or have any legal or equitable interest in any farm- o	commercial fishin	ng-related property?	
I	No.	Go to Part 7.			
ļ	☐ Yes.	. Go to line 47.			
Part 1	7:	Describe All Property You Own or Have an Interest in That You D	id Not List Above		
	Examp No	have other property of any kind you did not already list?  oles: Season tickets, country club membership  Give specific information			
		Lease of Solar panel system			Unknown
54.	Add t	he dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part 8	B:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$490,000.00
56.	Part 2	2: Total vehicles, line 5	\$33,983.00	_	
57.	Part 3	: Total personal and household items, line 15	\$4,500.00		
58.	Part 4	: Total financial assets, line 36	\$14,300.00		
59.	Part 5	: Total business-related property, line 45	\$1,000.00		
60.	Part 6	3: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	': Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$53,783.00	Copy personal property total	\$53,783.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$543,783.00

Official Form 106A/B Schedule A/B: Property page 7

Fill in this infor				
Debtor 1	Gerald Lee Lowe	ry		
	First Name	Middle Name	Last Name	
Debtor 2	Linda Kay Lowery	у		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA	
Case number				
(if known)				☐ Check if this is an amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
2000 Chevrolet Express Cargo Van 185000 miles	\$1,851.00		\$1,851.00	C.C.P. § 703.140(b)(2)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
2010 Ford Fusion 169000 miles Line from Schedule A/B: 3.3	\$3,451.00		\$3,451.00	C.C.P. § 703.140(b)(2)
Ellio II di II donedale / V.B. did			100% of fair market value, up to any applicable statutory limit	
Furniture and household items Line from Schedule A/B: 6.1	\$2,000.00		\$2,000.00	C.C.P. § 703.140(b)(3)
Zino nom concodico / v Zi. com			100% of fair market value, up to any applicable statutory limit	
clothing	\$2,000.00		\$2,000.00	C.C.P. § 703.140(b)(3)
Elle Helli Genedale AVB. 1111			100% of fair market value, up to any applicable statutory limit	
Jewelry	\$500.00		\$500.00	C.C.P. § 703.140(b)(4)
LINE HOLL SCHEUUIE AV.D. 12.1			100% of fair market value, up to any applicable statutory limit	

	btor 1 btor 2	Gerald Lee Lowery Linda Kay Lowery			Case number (if known)	
		description of the property and line on full Idea A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Chec #836	king: Chase 3	\$1,800.00		\$1,800.00	C.C.P. § 703.140(b)(5)
	Line f	rom Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Chec #365	king: Wells fargo	\$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(5)
		rom Schedule A/B: <b>17.2</b>			100% of fair market value, up to any applicable statutory limit	
	Chec #080	cking: Chase	\$500.00		\$500.00	C.C.P. § 703.140(b)(5)
		rom Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	Chec #235	kking: Chase	\$1,800.00		\$1,800.00	C.C.P. § 703.140(b)(5)
		rom Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
	Hom payn	eowners Insurance policy claim	\$9,200.00	•	\$9,200.00	C.C.P. § 703.140(b)(5)
	Bene	officiary: Debtors/CIT rom Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
		Insurance policyterm	\$0.00		\$2,000.00	C.C.P. § 703.140(b)(8)
		rom Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
	Tools	s rom <i>Schedule A/B</i> : <b>40.1</b>	\$1,000.00		\$1,000.00	C.C.P. § 703.140(b)(6)
	LIIIG	Ioni Schedule A/D. 40.1			100% of fair market value, up to any applicable statutory limit	
3.	(Subjection of Subjection of S	ou claiming a homestead exemption ect to adjustment on 4/01/19 and every eve	3 years after that for ca	ases fi	ŕ	,
	[	Yes				

Fill in this information to identify yo	All Caso.			
	ui case.			
Debtor 1 Gerald Lee Lov First Name	<b>y</b>			
Debtor 2 Linda Kay Low (Spouse if, filing) First Name	Middle Name Last Name		-	
	OOLITHERN DIOTRICT OF OALIFORNIA			
United States Bankruptcy Court for the	SOUTHERN DISTRICT OF CALIFORNIA			
Case number				
(if known)			☐ Check	if this is an
			ameno	led filing
Official Form 100D				
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secured	d by Propert	У	12/15
	. If two married people are filing together, both are eq t out, number the entries, and attach it to this form. On			
1. Do any creditors have claims secured	hy your property?			
`		ou have nothing also t	o roport on this form	
_	this form to the court with your other schedules. Ye	ou have nothing else t	o report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
for each claim. If more than one creditor ha	s more than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. As stical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the	Column B  Value of collateral that supports this	Column C Unsecured portion
	, and the second	value of collateral.	claim	if any
2.1 CIT Bank Creditor's Name	Describe the property that secures the claim:	\$493,317.00	\$490,000.00	\$3,317.00
Creditor's Name	11834 Lakeside Ave. Lakeside, CA 92040 San Diego County			
P.O. Box 7056	As of the date you file, the claim is: Check all that			
Pasadena, CA 91109	apply. ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number 3868			
2.2 GM Financial	Describe the property that secures the claim:	\$25,400.00	\$28,681.00	\$0.00
Creditor's Name	2016 Chevrolet Silverado 13500 miles	., .,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
DO D 400004	As of the date you file, the claim is: Check all that			
PO Box 183834 Arlington, TX 76096	apply.			
	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or sec	cured		
☐ Debtor 2 only	car loan)	, u. J J		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 9/2016	Last 4 digits of account number 8971			

Official Form 106D

#### Case 18-04175-LT13 Filed 07/13/18 Entered 07/13/18 16:28:51 Doc 1 Pg. 21 of 68

Debtor 1 Gerald Lee Lowery		Case number (if know)			
First Name Middle N	ame Last Name	_			
Debtor 2 Linda Kay Lowery					
First Name Middle N	lame Last Name				
2.3 Sunrun Installation	Describe the property that secures the claim:	Unknown	Unknown	Unknown	
Creditor's Name	Leased solar syatem				
775 Fiero Ln, Ste 200 San Luis Obispo, CA 93401 Number, Street, City, State & Zip Code	As of the date you file, the claim is: Check all the apply.  Contingent Unliquidated Disputed	t			
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mortgage of car loan)	r secured			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lie	n)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred 2/2016	Last 4 digits of account number				
Add the dellar value of your entries in C	Column A on this page. Write that number here:	\$518,717.00	0		
If this is the last page of your form, add					
Write that number here:	, and a second of the property	\$518,717.00	U		
Part 2: List Others to Be Notified for	or a Debt That You Already Listed				
trying to collect from you for a debt you o	oe notified about your bankruptcy for a debt that owe to someone else, list the creditor in Part 1, a t you listed in Part 1, list the additional creditors nis page.	nd then list the collection agenc	y here. Similarly, if yo	u have more	
Name, Number, Street, City, State & CIT Bank, NA	Zip Code On	which line in Part 1 did you enter t	he creditor? 2.1		
75 North Fair Oaks Ave Pasadena, CA 91103	La:	st 4 digits of account number <u>386</u>	<u>68</u>		
Name, Number, Street, City, State & Trustee Corps		which line in Part 1 did you enter t			
Foreclosure Dept. 17100 Gillette Avenue Irvine, CA 92614	La	st 4 digits of account number <u>230</u>	<u>00                                   </u>		

I=#111#	in this inform	nation to identify your c	200					
Deb	tor 1	Gerald Lee Lowery	Middle Name	Last Nam				
Deh	tor 2	Linda Kay Lowery	Wildle Name	Lastivani	,			
	use if, filing)	First Name	Middle Name	Last Name	)			
Unit	ed States Bar	nkruptcy Court for the:	SOUTHERN DIST	RICT OF CALIFORNIA	Ą			
O								
(if kno	e number own)						☐ Check	if this is an
							_	led filing
Offi	icial Form	106E/F						
		/F: Creditors WI	no Have Uns	secured Claim	s			12/15
any e Sche Sche left. <i>A</i>	executory cont dule G: Execu- dule D: Credito Attach the Con and case nun	I accurate as possible. Use racts or unexpired leases t tory Contracts and Unexpir ors Who Have Claims Secu tinuation Page to this page nber (if known).	hat could result in a ed Leases (Official F red by Property. If m . If you have no info	claim. Also list executo form 106G). Do not inclu ore space is needed, co	ry contract de any cre py the Part	ts on Schedule A/B: Feditors with partially s t you need, fill it out,	Property (Official For secured claims that a number the entries i	m 106A/B) and on are listed in n the boxes on the
		ors have priority unsecured		)				
	No. Go to P	. ,	olumo agamor you .					
	Yes.	art Z.						
I	possible, list the Part 1. If more t	pe of claim it is. If a claim has e claims in alphabetical order than one creditor holds a part ation of each type of claim, se	according to the cred icular claim, list the ot	itor's name. If you have me her creditors in Part 3.	ore than tw			
	1					***	amount	amount
2.1	Priority Cre Internal PO Box	nent of Treasury editor's Name Revenue Service 7346 Iphia, PA 19101-7346		gits of account number	2014-20	\$33,000.00 017	\$33,000.00	\$0.00
		reet City State Zlp Code	As of the	date you file, the claim	is: Check a	all that apply		
	Who incurred	I the debt? Check one.	☐ Contir	ngent				
	Debtor 1 o	nly	☐ Unliqu	uidated				
	Debtor 2 o	nly	☐ Dispu	ted				
	Debtor 1 a	nd Debtor 2 only	Type of F	PRIORITY unsecured cla	im:			
	_	e of the debtors and another	☐ Dome	stic support obligations				
	Check if t	his claim is for a communi	ty debt Taxes	and certain other debts y	ou owe the	government		
		ubject to offset?		s for death or personal inj	ury while yo	ou were intoxicated		
	■ No	•	☐ Other	. Specify				
	Yes			income tax	(			
Part	2: List Al	I of Your NONPRIORITY	' Unsecured Claim	is				
		rs have nonpriority unsecu						
I	☐ No. You hav	ve nothing to report in this pa	rt. Submit this form to	the court with your other	chedules.			
1	Yes.							
t	unsecured clair	nonpriority unsecured clain, list the creditor separately or holds a particular claim, lis	for each claim. For ea	ch claim listed, identify wh	at type of c	claim it is. Do not list cla	aims already included	in Part 1. If more

Total claim

	r 1 Gerald Lee Lowery r 2 Linda Kay Lowery	Case number (if know)	
4.1	Best Buy Credit	Last 4 digits of account number 0803	\$1,584.00
	Nonpriority Creditor's Name Po Box 790441 St. Louis, MO 63179	When was the debt incurred? 2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify consumer debt	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	PO Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.  ☐ Debtor 1 only		
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Chase Nonpriority Creditor's Name	Last 4 digits of account number 6235	\$1,457.00
	PO Box 15298 Wilmington, DE 19850	When was the debt incurred? 2018	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Debt (Unsecured)	

Debtor Debtor	Gerald Lee Lowery Linda Kay Lowery		Case number (if know)	
4.4	Chase Nonpriority Creditor's Name	Last 4 digits of account number	8226	\$4,949.00
	PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	2017-2018	
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent		
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	_	Student loans	d Claim.	
	■ Check if this claim is for a community debt  Is the claim subject to offset?	<u> </u>	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	· ·		
	⊔ Yes	Other. Specify Credit Card	T Dept (Unsecured)	
4.5	Chase Nonpriority Creditor's Name	Last 4 digits of account number	7341	\$1,553.00
	PO Box 15298 Wilmington, DE 19850	When was the debt incurred?	2017-2018	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	Debt (Unsecured)	
4.6	Citibank/Citicard	Last 4 digits of account number	6187	\$2,856.00
	Nonpriority Creditor's Name PO Box 6500	When was the debt incurred?	2017-2018	
-	Sioux Falls, SD 57117  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	Other. Specify credit card		
	<b>—</b> 100	Other. Specify		

	1 Gerald Lee Lowery 2 Linda Kay Lowery		Case number (if know)	
4.7	Comenity Bank	Last 4 digits of account number	7728	\$299.00
	Nonpriority Creditor's Name bankruptcy Dept. Po Box 182125 Columbus OH 43318-3135	When was the debt incurred?	4/2018	
	Columbus, OH 43218-2125  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another ■ Check if this claim is for a community	☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	,	
	Yes	Other. Specify consumer	debt	
4.8	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	4299	\$1,199.00
	P.O. Box 98873 Las Vegas, NV 89193-8873	When was the debt incurred?	2018	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	Debt (Unsecured)	
4.9	Department of Treasury Nonpriority Creditor's Name	Last 4 digits of account number		\$6,650.00
	Internal Revenue Service PO Box 7346	When was the debt incurred?	2012-2013	
	Philadelphia, PA 19101-7346  Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify income tax		
		- Other. Specify		

	or 1 Gerald Lee Lowery Or 2 Linda Kay Lowery		Case number (if know)	
4.1 0	Home Depot Credit Svcs	Last 4 digits of account number	0568	\$2,422.00
	Nonpriority Creditor's Name PO Box 790328	When was the debt incurred?	2017-2018	
	St. Louise, MO 63179  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	_		
	Debtor 2 only	Contingent		
		Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	I Debt (Unsecured)	
4.1 1	JCPenny	Last 4 digits of account number	1221	\$499.00
	Nonpriority Creditor's Name PO Box 965009 Orlando, FL 32896	When was the debt incurred?	2018	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify consumer of	debt	
4.1	Kohl's		6150	\$1,713.00
2	Nonpriority Creditor's Name	Last 4 digits of account number	6158	\$1,713.00
	PO Box 3043 Milwaukee, WI 53201	When was the debt incurred?	1/18-5/2018	
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	Other, Specify		

Official Form 106 E/F

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Merrick Bank Nonpriority Creditor's Name PO Box 9201 Old Bethpage, NY 11804 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only  Merrick Bank Last 4 digits of account number When was the debt incurred? 2018  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated	\$1,222.00
Nonpriority Creditor's Name PO Box 9201 Old Bethpage, NY 11804 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only  Contingent	
Number Street City State ZIp Code  Who incurred the debt? Check one.  Debtor 1 only  Contingent	
☐ Debtor 1 only ☐ Contingent	
Debter 2 only	
Unliquidated	
■ Debtor 1 and Debtor 2 only	
☐ At least one of the debtors and another  Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community  debt  Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify <b>credit card</b>	
4.1 Target National Bank Last 4 digits of account number 2451	\$315.00
Nonpriority Creditor's Name 3901 West 53rd St Sioux Falls, SD 57106 When was the debt incurred? 2018	
Number Street City State Zlp Code  As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	
☐ Debtor 1 only ☐ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
Debter 4 and Debter 0 and	
☐ Disputed ☐ At least one of the debtors and another ☐ Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community  debt  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify <b>consumer debt</b>	
4.1 Wells Fargo Card Svcs Last 4 digits of account number 4088	\$219.00
Nonpriority Creditor's Name	
Po Box 10347 When was the debt incurred? 5/2018	
Des Moines, IA 50306  Number Street City State Zlp Code  As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	
☐ Debtor 1 only ☐ Contingent	
Dobtor 2 only	
■ Debtor 1 and Debtor 2 only	
■ Debtor 1 and Debtor 2 only  □ Disputed  Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community debt Student loans  □ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify crdit card	

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case number (if know)
On which entry in Part 1 or Part 2 did you list the original creditor?  Line 2.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number
On which entry in Part 1 or Part 2 did you list the original creditor?  Line 4.9 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims  Last 4 digits of account number

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	33,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	33,000.00
				Ψ	33,000.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total					
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			
	og.	you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	26,937.00
		here.			
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	26,937.00
	,		•		20,007.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Gerald Lee Lowe	ry		
	First Name	Middle Name	Last Name	
Debtor 2	Linda Kay Lowery	у		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF CALIFORNIA	
Case number				
(if known)				☐ Check if this is amended filing

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Sunrun Installation 775 Fiero Ln, Ste 200 San Luis Obispo, CA 93401	Lease of solar panel system commenced 2/2016 ending 2036 \$\$407/mo.

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Fill in this	information to iden	tify your case:			
Debtor 1		ee Lowery			
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) Linda Kay	y Lowery  Middle Name	Last Name		
United Sta	ites Bankruptcy Court	for the: SOUTHERN DIS	STRICT OF CALIFORNIA		
Case num (if known)	ber				☐ Check if this is an amended filing
	l Form 106H Iule H: Your	Codebtors			12/15
people are fill it out, a	filing together, both and number the entri	n are equally responsible f	or supplying correct informa . Attach the Additional Page	tion. If more space is n	ate as possible. If two married eeded, copy the Additional Page, o of any Additional Pages, write
1. Do	you have any codeb	otors? (If you are filing a join	t case, do not list either spouse	e as a codebtor.	
■ No	S				
Arizon  No.	na, California, Idaho, L Go to line 3.	Louisiana, Nevada, New Me	unity property state or territo xico, Puerto Rico, Texas, Washalent live with you at the time?		states and territories include
in line Form	e 2 again as a codeb	tor only if that person is a	guarantor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your code Name, Number, Street, City,			Column 2: The cre Check all schedule	editor to whom you owe the debt as that apply:
-	Name  Number Street	Chalc	ZIP Code	☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	ine
	City	State	ZIP Code		
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	ine
	Number Street City	State	ZIP Code		

Fill in this information t	to identify your case:	
Debtor 1	Gerald Lee Lowery	
Debtor 2 (Spouse, if filing)	Linda Kay Lowery	
United States Bankrup	otcy Court for the: SOUTHERN DISTRICT OF CALIFORNIA	
Case number (If known)		Check if this is:  An amended filing  A supplement showing postpetition chapter
Official Form	1061	13 income as of the following date:  MM / DD/ YYYY

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Describe Employment** Part 1: Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Self employed/Handyman Occupation Salon Services/manicurist Include part-time, seasonal, or JL Repairs & Home self-employed work. Linda's Hair & Nails & Reflexology Employer's name Improvement Occupation may include student or homemaker, if it applies. **Employer's address** 11834 Lakeside Ave 124 Lomas Santa Fe Ave Lakeside, CA 92040 Solana Beach, CA 92075 How long employed there? 10/89-present 6/2018-present

**Give Details About Monthly Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 0.00 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 +\$ 0.00 3. Calculate gross Income. Add line 2 + line 3. 0.00 \$ 0.00

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1 tor 2	Gerald Lee Lowery Linda Kay Lowery	_	С	ase numbe	er (if kno	wn)			
				ì	For Debt	or 1			Debtor 2 or -filing spouse	
	Cop	py line 4 here	4.		\$	0.	00	\$	0.00	
5.	List	t all payroll deductions:								
-	5a.		5a.		\$	٥	00	\$	0.00	n
	5b.		5b.		\$		00	\$_	0.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$		00	\$_	0.00	
	5d.	· · · · · · · · · · · · · · · · · · ·	5d.		\$		00	\$_	0.00	
	5e.	, ,	5e.		\$		00	\$	0.00	
	5f.	Domestic support obligations	5f.		\$		00	\$	0.00	
	5g.	Union dues	5g.		\$	0.	00	\$	0.00	<u> </u>
	5h.	Other deductions. Specify:	5h.	.+	\$	0.	00	+ \$	0.00	)
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	,	\$	0.	00	\$	0.0	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	\$	0.	00	\$	0.0	)
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$ 3	3.500.	00	\$	4,037.0	_ n
	8b.		8b.		\$	,	00	\$	0.00	
	8c. 8d. 8e.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.		\$ \$ \$	0.	00 00 00	\$ \$ \$	0.00 0.00 938.00	)
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	e 8f. 8g.		\$ \$		00 00	\$_ \$	0.00	
	8h.		8h.		\$	250.		+ \$	0.00	
		, <u></u>	_					Ë		_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3	3,750.	00	\$	4,975.0	00
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$	3.750	.00 -	<b>\$</b>	4.9	975.00 = \$	8,725.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		_	-, -			,		-,
11.	I. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00									
12.		d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certaillies							12. \$ <b>Comb</b>	
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?						month	nly income
		Yes. Explain:								

SIII	in this informs	ation to identify yo	our case.							
	111 11115 1111011116	ation to identity yo	Jui case.							
Deb	tor 1	Gerald Lee L	owery			_	eck if this is:			
Deb	tor 2	Linda Kay Lo	owory				An amende	•	ving postpetition chapt	Δr
	ouse, if filing)	Liliua Kay Li	owery			ы			the following date:	Ci
Unite	ed States Bank	ruptcy Court for the	: SOUTH	IERN DISTRICT OF CALIF	ORNIA		MM / DD / Y	YYY		
Case	e number									
(If kr	nown)									
Of	fficial Fo	orm 106J								
Sc	chedule	J: Your	Exper	ises					1	2/15
Be a info nun	as complete ormation. If m nber (if know	and accurate as nore space is ne n). Answer ever	s possible eded, atta ry questio	. If two married people ar					r supplying correct	
Part 1.	Is this a join	ribe Your House nt case?	ehold							
١.	□ No. Go to									
		es Debtor 2 live	in a senar	ate household?						
	= 105. <b>5</b> 00		iii a sepai	ate nousenoia.						
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor 2.			
2.	Do you hav	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Depende age	nt's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									□ No	
									☐ Yes	
									□ No	
									☐ Yes ☐ No	
									☐ Yes	
3.	Do your ex	penses include		No					<b>-</b> 100	
		f people other t d your depende	han $_{\square}$	Yes						
Esti exp app	imate your exenses as of a plicable date.	a date after the less paid for with	our bankr bankruptc non-cash	y Expenses uptcy filing date unless y y is filed. If this is a supp government assistance it	lemental <i>Schedule</i> f you know	orm as a s	supplement in the box at the	າ a Cha ∋ top of	pter 13 case to repor f the form and fill in t	rt he
	ficial Form 10		u nave m	nuded it on <i>Schedule i. 1</i>	our income		Yo	ur expe	enses	
4.		or home owners nd any rent for th		ses for your residence. In or lot.	nclude first mortgage	4.	\$		3,194.00	
	If not include	ded in line 4:								
	4a. Real	estate taxes				4a.	\$		0.00	
		erty, homeowner's				4b.			0.00	
			•	upkeep expenses		4c.			120.00	
5.		eowner's associat		dominium dues <b>our residence,</b> such as hoi	me equity loans	4d. 5.	·		0.00	
٠.			y ·	<del></del>	oquity lourio	5.	T		0.00	

Debto			ee Lowery	0		
Debto	r 2	Linda Ka	ay Lowery	Case num	ber (if known)	
6. U	Jtiliti	ies:				
-	a.		, heat, natural gas	6a.	\$	400.00
6	b.	Water, sev	wer, garbage collection	6b.	\$	40.00
6	c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	500.00
6	d.	Other. Spe	ecify:	6d.	\$	0.00
7. <b>F</b>	ood	and hous	ekeeping supplies	7.	\$	600.00
8. <b>C</b>	hild	care and c	children's education costs	8.	\$	0.00
9. <b>C</b>	loth	ning, laund	ry, and dry cleaning	9.	\$	125.00
10. <b>P</b>	erse	onal care p	products and services	10.	\$	125.00
11. <b>N</b>	/ledi	cal and de	ntal expenses	11.	\$	20.00
12. <b>T</b>	rans	sportation.	Include gas, maintenance, bus or train fare.			
			ar payments.	12.	·	300.00
			clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
14. <b>C</b>	har	itable cont	ributions and religious donations	14.	\$	0.00
-		rance.				
			nsurance deducted from your pay or included in lines 4 or 20		¢	0.00
		Life insura Health ins		15a. 15b.	· ·	0.00
-					·	921.00
		Vehicle in:		15c.	·	186.00
			urance. Specify:	15d.	\$	0.00
	axe pec		clude taxes deducted from your pay or included in lines 4 or	20. 16.	\$	0.00
			ease payments:		Ψ	0.00
			ents for Vehicle 1	17a.	\$	524.00
			ents for Vehicle 2	17b.	·	0.00
		Other. Spe		17c.	·	0.00
		Other. Spe		17d. 17d.	*	0.00
			of alimony, maintenance, and support that you did not r		Ψ	0.00
			your pay on line 5, Schedule I, Your Income (Official For		\$	0.00
			s you make to support others who do not live with you.		\$	0.00
	Spec			19.		
20. <b>C</b>	the	r real prop	erty expenses not included in lines 4 or 5 of this form or	on Schedule I: Yo	our Income.	
2	0a.	Mortgages	s on other property	20a.	\$	0.00
2	0b.	Real estat	te taxes	20b.	\$	0.00
2	0c.	Property, I	homeowner's, or renter's insurance	20c.	\$	0.00
2	0d.	Maintenar	nce, repair, and upkeep expenses	20d.	\$	0.00
2	0e.	Homeown	er's association or condominium dues	20e.	\$	0.00
21. <b>C</b>	the	r: Specify:		21.	+\$	0.00
aa <b>a</b>	<b>.</b>					
		-	monthly expenses		•	7.455.00
			through 21.	10613	\$	7,155.00
			2 (monthly expenses for Debtor 2), if any, from Official Form	106J-2	\$	
2	2c. /	Add line 22	a and 22b. The result is your monthly expenses.		\$	7,155.00
23. <b>C</b>	alcı	ulate vour	monthly net income.			
		-	12 (your combined monthly income) from Schedule I.	23a.	\$	8,725.00
			monthly expenses from line 22c above.	23b.		7,155.00
		7 7	, . ,			
2	Зс.	Subtract y	our monthly expenses from your monthly income.			4 === 00
		The result	is your monthly net income.	23c.	\$	1,570.00
				<u>.</u>		
			an increase or decrease in your expenses within the yea by expect to finish paying for your car loan within the year or do you expect to finish paying for your car loan within the year or do you expect to finish paying for your car loan within the year or do you expect to finish paying for your car loan within the year or do you expect to finish the year.			o or docrosso bossues of s
			bu expect to finish paying for your car loan within the year or do you e terms of your mortgage?	xpect your mortgage	payment to increas	e or decrease decause of a
	■ No					
			Evoloin horo:			
L	∃ Y€	<del>2</del> 8.	Explain here:			

Fill in this i	nformation to identify your	case:			
Debtor 1					
Deptor i	Gerald Lee Lowel	Middle Name	Last Name		
Debtor 2	Linda Kay Lowery	V			
(Spouse if, filing		Middle Name	Last Name		
United State	es Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF CALIFORNIA		
Case number	er				
(if known)				_	Check if this is an amended filing
Declar If two marrie		r, both are equally resp le bankruptcy schedule	onsible for supplying corre		
years, or bo	th. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			·
Did yo	ou pay or agree to pay some	one who is NOT an atto	orney to help you fill out bar	nkruptcy forms?	
■ No	lo				
☐ Ye	es. Name of person			Attach Bankruptcy Peti Declaration, and Signa	ition Preparer's Notice, ture (Official Form 119)
	penalty of perjury, I declare ey are true and correct.	that I have read the sur	mmary and schedules filed	with this declaration and	
	Gerald Lee Lowery		X /s/ Linda Ka		
	erald Lee Lowery gnature of Debtor 1		Linda Kay Lo Signature of Do		
Dat	te <b>June 30, 2018</b>		Date <b>June</b> 3	30, 2018	

Fill	in this infor	mation to identify you	r case:			
	tor 1	Gerald Lee Low				
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	Linda Kay Lowe	Middle Name	Last Name		
		ankruptcy Court for the:	SOUTHERN DISTRICT (	OF CALIFORNIA		
_		, ,				
(if kno	e number __ _{pwn)}				-	heck if this is an
					a	mended filing
~		407				
		orm 107			_	
Sta	itement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		nore space is needed, n). Answer every que:		this form. On the top of any	y additional pages, write you	r name and case
Part	Give	Details About Your Ma	arital Status and Where You	Lived Before		
		ır current marital statu		2.1104 20.0.0		_
	_					
	<ul><li>Married</li><li>Not ma</li></ul>					
2.	During the	last 3 vears, have you	lived anywhere other than	where you live now?		
	_	, , ,				
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>i</i> .	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
					ity property state or territory	
siale	s and territor	nes include Anzona, Ca	iliomia, idano, Louisiana, ive	vada, New Mexico, Puerto R	ico, Texas, Washington and W	isconsin.)
	■ No					
	☐ Yes. M	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Expla	in the Sources of You	r Income			
	Fill in the tot	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?
	□ No					
	_	ll in the details.				
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until ed for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, commissions, bonuses, tips	\$53,976.00
			☐ Operating a business		Operating a business	

Official Form 107

	otor 1 otor 2		rald Lee L ida Kay Lo			Cas	e number (if known)	
					Debtor 1		Debtor 2	
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			dar year: December	31, 2017 )	☐ Wages, commissions, bonuses, tips	\$44,044.00	☐ Wages, commissions, bonuses, tips	\$100,984.00
					Operating a business		Operating a business	
			dar year be December		☐ Wages, commissions, bonuses, tips	\$52,914.00	☐ Wages, commissions, bonuses, tips	\$110,152.00
					Operating a business		Operating a business	
	List	No	ource and t	C	ome from each source separa	tely. Do not include income t	,	
					Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
			1 of currei iled for bar	nt year until nkruptcy:		exclusions) \$0.00	Social Security Benefits	\$5,628.00
			dar year: December	31, 2017 )		\$0.00	Social Security Benefits	\$12,144.00
			dar year be December			\$0.00	Social Security Benefits	\$12,000.00
<b>Pa</b> l 6.	t 3: Are			•	I Made Before You Filed for			
		No.			Debtor 2 has primarily consuma personal, family, or household		s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
			■ No.	90 days before 3	ore you filed for bankruptcy, di 7.	id you pay any creditor a tota	I of \$6,425* or more?	
			□ Yes	paid that ci	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the	nts for domestic support oblig		
			•	•	nt on 4/01/19 and every 3 year		or after the date of adjustmer	nt.
		Yes.		or Debtor 2 of	or both have primarily consu		l of \$600 or more?	
			During the	90 days befo	ore you filed for bankruptcy, di	d you pay any creditor a tota	ii or quou or more.	
			During the  No. Yes	90 days before 30 day		d you pay any creditor a tota	or \$000 or more:	

	btor 1 Gerald Lee Lowery btor 2 Linda Kay Lowery		Cas	e number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
	Within 1 year before you filed for bankruptour Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	tners; relatives of any gene control, or owner of 20% or	eral partners; partners more of their voting	erships of which yo g securities; and ar	u are a general ny managing ag	partner; corporation ent, including one fo
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
3.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosign		nents or transfer a	ny property on a	ccount of a del	ot that benefited an
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	
D۵	rt 4: Identify Legal Actions, Repossessions	s and Foreclosures				
	modifications, and contract disputes.  ■ No □ Yes. Fill in the details.  Case title	Nature of the case	Court or agency		Status of the	case
	Case number					
0.	Within 1 year before you filed for bankruptc Check all that apply and fill in the details below  No. Go to line 11.  ☐ Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	hed, attached,	seized, or levied?
	Creditor Name and Address	Describe the Property  Explain what happened		Date		Value of the property
1.	Within 90 days before you filed for bankrupt accounts or refuse to make a payment beca  No Yes. Fill in the details.	tcy, did any creditor, incl	uding a bank or fir	nancial institution	, set off any ar	nounts from your
	Yes. Fill in the details.  Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
2.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an		rty in the possess	ion of an assigne	e for the benef	it of creditors, a
	■ No □ Yes					

	btor 1 Gerald Lee Lowery btor 2 Linda Kay Lowery	Case number	(if known)	
Pai	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankruptcy,  ■ No □ Yes. Fill in the details for each gift.	did you give any gifts with a total value of more t	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	did you give any gifts or contributions with a total	I value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or contribu	ition.		
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankruptcy o or gambling?  ■ No □ Yes. Fill in the details.	r since you filed for bankruptcy, did you lose anyt	thing because of thef	t, fire, other disaster,
	how the loss occurred Includ	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	rt 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepar	did you or anyone else acting on your behalf pay or ing a bankruptcy petition? ers, or credit counseling agencies for services required		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Office of Brian A. Kretsch, APC 810 Jamacha Road, Suite 202 El Cajon, CA 92019 brikretsch@sbcglobal.net	Attorney Fees1690 file fee310	6/29/2018	\$1,690.00
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors or Do not include any payment or transfer that you list		or transfer any prope	rty to anyone who
	■ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

Address   Person's relationship to you   Person's relationship to you   Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)	Del	btor 2 Linda Kay Lowery		Cas	e number (if known)	
No   Yes. Fill in the details.   Description and value of property transferred	18.	transferred in the ordinary course of your bus Include both outright transfers and transfers mad	siness or financial affairs de as security (such as the	s?		
Person Who Received Transfer Address Address Person's relationship to you    Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)    No		■ No				
Person's relationship to you   Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are other called asset-protection devices.)   No		Person Who Received Transfer		i i	payments received or debts	Date transfer was made
beneficiary? (These are often called asset-protection devices.)  Name of trust  Description and value of the property transferred made  Part 3:  List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Sevet, City, State and ZIP account number account n		Person's relationship to you			paid in exchange	
Name of trust  Description and value of the property transferred  Date Transfer wa made  Part 8:  List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)  No State and	19.	beneficiary? (These are often called asset-prote		property to a self-	settled trust or similar device	of which you are a
Part 8:  List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Who else had access to it?  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  No  Yes. Fill in the details.  No  Part 9:  Identify Property You Hold or Control for Someone Else  No  Yes. Fill in the details.  No  Yes. Fill in the details.  Overer's Name  Address (Number, Street, City, State and ZIP Code)  Where is the property?  (Number, Street, City, State and ZIP Code)  Code)  Where is the property?  (Number, Street, City, State and ZIP Code)  Part 9:  Give Details About Environmental Information			Description and value	ue of the property	r transferred	Date Transfer was
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  No Yes. Fill in the details.  Do you still have it?  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No Yes. Fill on the details.  No Yes Part 30  No Yes Part 30  No Yes Part 30  No Yes Part 30  No Yes				,		
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No  Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No  No  No  Describe the contents  Do you still have it?  No  Describe the contents  No  Do you still have it?  No  Describe the contents  Do you still have it?  No  Describe the property you borrowed from, are storing for, or hold in trust for someone.  No  No  Describe the property  No  No  Describe the property  No  No  Describe the property  No  Describe the property  No  No  Describe the property  No  No  Describe the property  No  Describe the property  No  No  Describe the property  No  No  Describe the property  No  Describe the property  No  Describe the property	Pai	rt 8: List of Certain Financial Accounts, Inst	ruments, Safe Deposit B	oxes, and Storage	e Units	
Address (Number, Street, City, State and ZIP account number instrument closed, sold, moved, or transferred  21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?    No	20.	sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accounts	s; certificates of d		,
Cash, or other valuables?  ■ No  □ Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)  No □ Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  ■ No □ Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information		Name of Financial Institution and Address (Number, Street, City, State and ZIP	•	• •	closed, sold, moved, or	Last balance before closing o transfe
Yes. Fill in the details.   Name of Financial Institution   Address (Number, Street, City, State and ZIP Code)   No   Yes. Fill in the details.   Name of Storage Facility   Who else has or had access to it?   Address (Number, Street, City, State and ZIP Code)   Describe the contents   Do you still have it?	21.		ear before you filed for ba	ankruptcy, any sa	fe deposit box or other depos	itory for securities,
Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information		_				
No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information			Address (Number, Stree		cribe the contents	
Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information	22.	Have you stored property in a storage unit or	place other than your ho	ome within 1 year	before you filed for bankrupt	cy?
Address (Number, Street, City, State and ZIP Code)  to it? Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information		_				
Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information			to it? Address (Number, Stree		cribe the contents	•
for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  (Number, Street, City, State and ZIP Code)  Part 10:  Give Details About Environmental Information	Pai	rt 9: Identify Property You Hold or Control fo	or Someone Else			
☐ Yes. Fill in the details.         Owner's Name Address (Number, Street, City, State and ZIP Code)       Where is the property? (Number, Street, City, State and ZIP Code)       Describe the property       Value         Part 10:       Give Details About Environmental Information	23.		eone else owns? Includ	e any property yo	u borrowed from, are storing	for, or hold in trust
Address (Number, Street, City, State and ZIP Code)						
			(Number, Street, City, State		cribe the property	Value
For the purpose of Part 10, the following definitions apply:	Pa	rt 10: Give Details About Environmental Infor	mation			
	For	the purpose of Part 10, the following definition	ns apply:			

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

Debtor 1 Gerald Lee Lowery

**Gerald Lee Lowery Linda Kay Lowery** 

Debtor 2 Case number (if known) toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Court or agency Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper

11834 lakeside Ave Lakeside, CA 92040

Nail Trail

Salon services

**Nail Salon Supplier** 

From-To --12/2017(closed)

Dates business existed

From-To 10/89-present

EIN:

FIN:

Linda's Hair & Nails & Reflexology

124 Lomas Santa Fe Ave

Solana Beach, CA 92075

Debtor 1 Debtor 2	Gerald Lee Lowery Linda Kay Lowery	C	Case number (if known)
JL Ro 1183 Lake	Repairs & Home Improvement 34 Lakeside Ave seside, CA 92040	Describe the nature of the business  Name of accountant or bookkeeper  Handyman/home repair	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed EIN:  From-To 6/2018-present
instit	tutions, creditors, or other parties.  No Yes. Fill in the details below.	otcy, did you give a financial statement to  Date Issued	anyone about your business? Include all financial
have rea are true a with a ba	nd correct. I understand that making a		I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
/s/ Gera	ıld Lee Lowery	/s/ Linda Kay Lowery	
Gerald I	Lee Lowery e of Debtor 1	Linda Kay Lowery Signature of Debtor 2	
Date _J	une 30, 2018	Date June 30, 2018	
<b>Did you a</b> ■ No □ Yes	ttach additional pages to Your Statem	ent of Financial Affairs for Individuals Fili	ing for Bankruptcy (Official Form 107)?
■ No		ot an attorney to help you fill out bankrupt	

Fill in this inforr	Fill in this information to identify your case:							
Debtor 1	Gerald Lee Lowery							
Debtor 2 (Spouse, if filing)	Linda Kay Lowery							
United States E	Bankruptcy Court for the: Southern District of California							
Case number (if known)								

Check	Check as directed in lines 17 and 21:  According to the calculations required by this Statement:  1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).  2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	Statement:  1. Disposable income is not determined under						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).  —						
	11 U.S.C. § 1325(b)(3).  2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 0.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 250.00 0.00 you listed on line 3. Net income from operating a Debtor 1 Debtor 2 business, profession, or farm Gross receipts (before all 0.00 8.746.00 deductions) Ordinary and necessary 0.00 -\$ 0.00 operating expenses Net monthly income from a Copy 0.00 \$ 8,746.00 here -> \$ 0.00 8,746.00 business, profession, or farm 6. Net income from rental and other real property Debtor 1 \$ 0.00 Gross receipts (before all deductions) 0.00 -\$ Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

ebto ebto		a Kay Lowery				Case number	er ( <i>if known</i> )			
						Column A Debtor 1		Column B Debtor 2 o	or	
7	Interest c	lividends, and royalties				\$	0.00	\$	0.00	
		ment compensation				\$	0.00	\$	0.00	
	Do not ent	er the amount if you contend Security Act. Instead, list it h		d was a bene	fit under	· ——	0.00		0.00	
				0.	.00					
		r spouse			.00					
	Pension of	or retirement income. Do no der the Social Security Act.		eived that wa	as a	\$	0.00	\$	0.00	
	Do not include received a	om all other sources not lis lude any benefits received ur s a victim of a war crime, a co errorism. If necessary, list oth //	der the Social Security Arime against humanity, or	Act or paymer r internationa	nts I or					
						\$	0.00	\$	0.00	
						\$	0.00	\$	0.00	
	Т	otal amounts from separate p	ages, if any.		+	\$	0.00	\$	0.00	
1.		your total average monthly mn. Then add the total for Co			\$	250.00	+ \$_	8,746.00	= \$	8,996.00
		r total average monthly inc	***************************************						\$	8,996.00
	☐ You a	are not married. Fill in 0 belov	<i>V</i> .							
	■ You a	are married and your spouse	is filing with you. Fill in 0	below.						
	Fill in depe Belov	are married and your spouse the amount of the income lis indents, such as payment of t v, specify the basis for excludation tments on a separate page.	ted in line 11, Column B, ne spouse's tax liability o	r the spouse	's suppo	rt of someon	e other th	nan you or you	ur depend	ents.
	If this	adjustment does not apply,	enter 0 below.							
					. \$		_			
					. <del>Т</del> Ф					
		Total			\$	0.0	00Cd	opy here=>		0.00
4.	Your cur	rent monthly income. Subt	ract line 13 from line 12.						\$	8,996.00
5.	Calculate	e your current monthly inco	ome for the year. Follow	v these steps	:					
		ny line 14 here-		·					\$	8,996.00
		ultiply line 15a by 12 (the num							x	12
	15b. Th	e result is your current month	ly income for the year for	r this part of t	he form.				\$ <b>1</b>	07,952.00

**Gerald Lee Lowery** 

Debt			d Lee Lowery Kay Lowery		Case number (if known)		
16	. Calo	culate tl	he median family income that applies to yo	u. Follow these ste	eps:		
	16a	Fill in tl	he state in which you live.	CA			
	16b	Fill in tl	he number of people in your household.	2			
			ne median family income for your state and size			•	73,162.00
		To find instruc	a list of applicable median income amounts, tions for this form. This list may also be availa	go online using the		Ψ_	
17			e lines compare?				
	17a.	Ц	Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do NO				
	17b.	•	Line 15b is more than line 16c. On the top of 1325(b)(3). <b>Go to Part 3 and fill out Calcula</b> your current monthly income from line 14 about	ation of Your Disp			
Par	t 3:	Calc	ulate Your Commitment Period Under 11 U	.S.C. § 1325(b)(4)			
18.	Сор	y your	total average monthly income from line 11			. \$	8,996.00
19.	cont	end tha	marital adjustment if it applies. If you are n t calculating the commitment period under 11 come, copy the amount from line 13.				
			narital adjustment does not apply, fill in 0 on li	ne 19a.		-\$	0.00
	19b	Subtra	act line 19a from line 18.			\$	8,996.00
20.	Cald	ulate y	our current monthly income for the year.	Follow these steps:			
	20a	Copy li	ne 19b			\$_	8,996.00
		Multiply	y by 12 (the number of months in a year).			2	<b>x</b> 12
	20b	The re	sult is your current monthly income for the year	ar for this part of the	e form	\$_	107,952.00
	20c.	Copy ti	he median family income for your state and si	ze of household fro	om line 16c	\$_	73,162.00
	21.	How d	o the lines compare?				
			ne 20b is less than line 20c. Unless otherwise eriod is 3 years. Go to Part 4.	e ordered by the co	urt, on the top of page 1 of this form, c	heck box 3,	The commitment
			ne 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ess otherwise order	red by the court, on the top of page 1 o	f this form, c	heck box 4, <i>The</i>
Par	t 4:	Sign	Below				
	By s	igning h	nere, under penalty of perjury I declare that the	e information on th	s statement and in any attachments is	true and cor	rect.
)	( /s/	Geral	d Lee Lowery	x	/s/ Linda Kay Lowery		
•	Ge	rald L	ee Lowery of Debtor 1		Linda Kay Lowery Signature of Debtor 2		
	•		e 30, 2018		Date <b>June 30, 2018</b>		
			DD / YYYY		MM / DD / YYYY		
	If yo	u check	ed 17a, do NOT fill out or file Form 122C-2.				
	If yo	u check	ed 17b, fill out Form 122C-2 and file it with thi	s form. On line 39	of that form, copy your current monthly	income fron	n line 14 above.

**Gerald Lee Lowery** 

Fill in	this information to id	dentify your case:					
Debto	Gerald Le	e Lowery					
Debtoi (Spous	r 2 Linda Kay se, if filing)	Lowery					
United	States Bankruptcy Co	ourt for the: Southern I	District of California				
Case r	number wn)				☐ Check if this	s is an amende	d filing
	1 Form 122C-2 pter 13 Calc	ulation of Yo	our Disposab	le Income			04/16
	out this form, you wil itment Period (Officia		copy of Chapter 13 St	atement of Your Curren	nt Monthly Incon	ne and Calculati	on of
space	is needed, attach a se		orm, Include the line no	g together, both are equ umber to which addition			
Part 1	Calculate Your	Deductions from Your	Income				
the	questions in lines 6-		ndards, go online using	rds for certain expense g the link specified in th			
exp	enses if they are highe	r than the standards. Do	o not include any operati	al expense. In later parts or ing expenses that you sub ouse's income in line 13 or	otracted from inco	ome in lines 5 an	
If yo	our expenses differ from	m month to month, enter	the average expense.				
Note	e: Line numbers 1-4 ar	e not used in this form.	These numbers apply to	information required by a	a similar form use	ed in chapter 7 ca	ises.
5.	The number of peop	ole used in determinin	g your deductions fron	n income			
		ny additional dependent		your federal income tax re is number may be differen		2	
Nat	ional Standards	You must use the II	RS National Standards t	o answer the questions in	lines 6-7.		
6.			number of people you e lothing, and other items.	entered in line 5 and the IF	RS National	\$	1,202.00
7.	the dollar amount for people who are 65 or	out-of-pocket health car	re. The number of people eople have a higher IRS	you entered in line 5 and e is split into two categoric allowance for health car on line 22.	espeople who a	re under 65 and	

Debtor 1 Debtor 2	Gerald Lee Lowery Linda Kay Lowery		Case number	(if known)	
People	e who are under 65 years of age				
7	a. Out-of-pocket health care allowance per person	\$ 52			
7	b. Number of people who are under 65	X 2	-		
7	c. <b>Subtotal.</b> Multiply line 7a by line 7b.	\$ 104.00	Copy here	=> \$104.00	
People	e who are 65 years of age or older				
7	d. Out-of-pocket health care allowance per person	\$ 114			
7	e. Number of people who are 65 or older	x <b>0</b>			
7	f. Subtotal. Multiply line 7d by line 7e.	\$ 0.00	Copy here	=> \$0.00	
7	g. <b>Total.</b> Add line 7c and line 7f		\$104.00_	Copy total here=	\$104.00
Local	Standards You must use the IRS Local Standards to	o answer the questi	ons in lines 8-15.		
Based	I on information from the IRS, the U.S. Trustee Proguptcy purposes into two parts:	·		ard for housing for	
■ Но	using and utilities - Insurance and operating expen	ses			
■ Но	using and utilities - Mortgage or rent expenses				
separa 8. H	swer the questions in lines 8-9, use the U.S. Trusted ate instructions for this form. This chart may also be lousing and utilities - Insurance and operating expension the dollar amount listed for your county for insurance and operating expensions.	e available at the lenses: Using the nu	bankruptcy clerk's of modern of people you e	office.	590.00
9. <b>H</b>	lousing and utilities - Mortgage or rent expenses:				
9	<ul> <li>Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense</li> </ul>		unt	\$\$	
9	b. Total average monthly payment for all mortgages a	and other debts sec	ured by your home.		
	To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.				
	Name of the creditor	Average mo	nthly		
	CIT Bank	\$\$	194.00		
	9b. Total average monthly paymer	s	194.00 Copy	-\$3,194.00	Repeat this amount on line 33a.
9	c. Net mortgage or rent expense.				
	Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, ent		ge \$	0.00 Copy	\$0.00
	you claim that the U.S. Trustee Program's division ffects the calculation of your monthly expenses, fill			g is incorrect and	\$
	Explain why:				

Debtor 1 Debtor 2		d Lee Lowery Kay Lowery			Case number (if known)		
11.	Local tra	nsportation expenses	s: Check the number of vehic	les for which you claim	an ownership or operating	g expense.	
	□ 0. Go	to line 14.					
	☐ 1. Go	to line 12.					
	2 or m	ore. Go to line 12.					
12.			sing the IRS Local Standards	and the number of veh	nicles for which you claim t	he	
	operating	expenses, fill in the O	perating Costs that apply for y	our Census region or i	metropolitan statistical are	a. \$	522.00
13.	You may		pense: Using the IRS Local sif you do not make any loan of				
Vel	hicle 1	Describe Vehicle 1:	2016 Chevrolet Silverac	lo 13500 miles			
13a.	Ownershi	p or leasing costs usin	g IRS Local Standard		. \$ 497.00		
13b.	Average i	monthly payment for al	debts secured by Vehicle 1.				
	Do not inc	clude costs for leased v	vehicles.				
	are contra		y payment here and on line 1 cured creditor in the 60 montl		at		
	Nam	ne of each creditor for	· Vehicle 1	Average monthly payment			
	GM	Financial		\$\$			
		Total A	verage Monthly Payment	\$489.60	Copy here => -\$ 489	Repeat this amount on line 33b.	
13c.		cle 1 ownership or lease ine 13b from line 13a.	e expense if this number is less than \$0,	enter \$0	\$	Copy net Vehicle 1 expense here => \$	7.40
Vel	hicle 2	Describe Vehicle 2:					
13d.	Ownershi	p or leasing costs usin	g IRS Local Standard		\$0.00		
13e.	Average r leased ve	, , ,	debts secured by Vehicle 2.	Do not include costs fo	OT .		
	Nam	ne of each creditor for	Vehicle 2	Average monthly payment			
	-NO	NE-		\$			
		Total a	verage monthly payment	\$0.00	Copy here => -\$ 0.0	Repeat this amount on line 33c.	
13f.		cle 2 ownership or leas	•			Copy net Vehicle 2	
	Suptract I	ine 13e from line 13d.	if this number is less than \$0,	enter \$U	\$ <b>0.00</b>	expense here => \$	0.00
14.			e: If you claimed 0 vehicles i e allowance regardless of w			n the \$	0.00
15.	also dedu	ıct a public transportati	on expense: If you claimed 1 on expense, you may fill in what all Standard for <i>Public Transp</i>	nat you believe is the a			0.00

**Linda Kay Lowery** Debtor 2 Case number (if known) In addition to the expense deductions listed above, you are allowed your monthly expenses for Other Necessary Expenses the following IRS categories. 16. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 885.00 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 0.00 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form 0.00 of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 0.00 expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. 3,310.40 \$ 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23. **Additional Expense Deductions** These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 921.00 Disability insurance 0.00 Health savings account 0.00 +\$ Total 921.00 Copy total here=> 921.00 Do you actually spend this total amount? No. How much do you actually spend? \$ 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may 0.00 include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b) 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential.

**Gerald Lee Lowery** 

Debtor 1

	Linda Kay Lowery	Case numb	er (if known)				
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and	operating e	expense	s on		
	If you believe that you have home energy of 8, then fill in the excess amount of home er	costs that are more than the home energy costs incl nergy costs	uded in ex	penses	on line		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show tary.	that the ad	ditional		\$	0.0
		dren who are younger than 18. The monthly expere ependent children who are younger than 18 years o					
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain not already accounted for in lines 6-23.	n why the a	amount			
	* Subject to adjustment on 4/01/19, and evo	ery 3 years after that for cases begun on or after the	e date of a	djustme	nt.	\$	0.0
		the monthly amount by which your actual food and on a gallowances in the IRS National Standards. That are in the IRS National Standards.					
		ional allowance, go online using the link specified in so be available at the bankruptcy clerk's office.	n the sepa	rate			
	You must show that the additional amount	claimed is reasonable and necessary.				\$	0.0
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	e amount that you will continue to contribute in the fanization. 11 U.S.C. § 548(d)(3) and (4).	orm of cas	h or fina	ncial		
	Do not include any amount more than 15% of your gross monthly income.						
	Add all of the additional expense deduc	tions.				\$	921.00
	•						
	or debts that are secured by an interest	in property that you own, including home morto	iages veh	icle			
	or debis that are secured by an interest			11010			
IC	pans, and other secured debt, fill in lines		,,				
Т		33a through 33e.  ent, add all amounts that are contractually due to e		ed			
Т	o calculate the total average monthly paym	33a through 33e.  ent, add all amounts that are contractually due to e		ed			e monthly
T c	o calculate the total average monthly paym reditor in the 60 months after you file for ba Mortgages on your home	s 33a through 33e. sent, add all amounts that are contractually due to enkruptcy. Then divide by 60.	ach secure		=>	Averag payme	nt
Т	o calculate the total average monthly paym reditor in the 60 months after you file for ba Mortgages on your home Copy line 9b here	33a through 33e.  ent, add all amounts that are contractually due to e	ach secure		=>	payme	
T c 33a.	o calculate the total average monthly paym reditor in the 60 months after you file for ba Mortgages on your home  Copy line 9b here  Loans on your first two vehicles	s 33a through 33e.  ent, add all amounts that are contractually due to enkruptcy. Then divide by 60.	ach secure		=>	payme	3,194.00
T c 33a. 33b.	o calculate the total average monthly paymeditor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	s 33a through 33e. In a second	ach secure		=>	payme	3,194.00 489.60
33a. 33b. 33c.	o calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here	s 33a through 33e.  ent, add all amounts that are contractually due to enkruptcy. Then divide by 60.	ach secure		=>	payme	3,194.00
33a. 33b. 33c. 33d.	o calculate the total average monthly paymeditor in the 60 months after you file for ba  Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	s 33a through 33e. In a second	Doe inclu	es paymude taxe	=> => ent	payme	3,194.00 489.60
33a. 33b. 33c. 33d.	o calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	s 33a through 33e.  lent, add all amounts that are contractually due to e nkruptcy. Then divide by 60.	Doe incluor in	es paym ude taxe	=> => ent	payme	3,194.00 489.60
33a. 33b. 33c. 33d.	o calculate the total average monthly paymreditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	s 33a through 33e.  lent, add all amounts that are contractually due to e nkruptcy. Then divide by 60.	Doe included in the control or in	es paym ude taxe nsurance No	=> => ent es	\$\$ \$\$	3,194.00 489.60
33a. 33b. 33c. 33d.	o calculate the total average monthly paymeditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	s 33a through 33e.  lent, add all amounts that are contractually due to e nkruptcy. Then divide by 60.	Doe incluor in	es paym ude taxe	=> => ent es	payme	3,194.00 489.60
33a. 33b. 33c. 33d.	o calculate the total average monthly paymreditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	s 33a through 33e.  lent, add all amounts that are contractually due to e nkruptcy. Then divide by 60.	Doe included in the control or in	es paym ude taxe nsurance No	=> => ent es	\$\$ \$\$	3,194.00 489.60
33a. 33b. 33c. 33d.	o calculate the total average monthly paymreditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	s 33a through 33e.  lent, add all amounts that are contractually due to e nkruptcy. Then divide by 60.	Doe incluor ir	es paym ude taxe nsurance No Yes	=> => ent es =?	\$\$ \$\$	3,194.00 489.60
33a. 33b. 33c. 33d.	o calculate the total average monthly paymreditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	s 33a through 33e.  lent, add all amounts that are contractually due to e nkruptcy. Then divide by 60.	Doe include or include or include on the control of the control on	es paym ude taxe nsurance No Yes No Yes	=> => ent es =?	\$ \$ \$	3,194.00 489.60
33a. 33b. 33c. 33d.	o calculate the total average monthly paymreditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	s 33a through 33e.  lent, add all amounts that are contractually due to e nkruptcy. Then divide by 60.	Doe include or in the control of the	es paym ude taxe nsurance No Yes No Yes	=> => ent es es	\$ \$ \$	3,194.00 489.60
33a. 33b. 33c. 33d.	o calculate the total average monthly paymreditor in the 60 months after you file for bath Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts: e of each creditor for other secured debt	s 33a through 33e.  lent, add all amounts that are contractually due to e nkruptcy. Then divide by 60.	Doe include or include or include on the control of the control on	es paym ude taxe nsurance No Yes No Yes	=> => ent es e)?	\$ \$ \$	3,194.00 489.60

	erald Lee Lowery inda Kay Lowery			Cas	e number ( <i>if known</i> )		
		line 33 secured by your prin your support or the support			,		
□и	o. Go to line 35.						
	es. State any amount that y listed in line 33, to keep	ou must pay to a creditor, in a possession of your property (ill in the information below.					
Name of	the creditor	Identify property that secu	ıres the debt		Total cure amount	Month amou	nly cure nt
		11834 Lakeside Ave					
CIT Ba	nk	92040 San Diego Co	ounty	\$	45,000.00		750.00
		_		\$ \$		$\div 60 = \$$ $\div 60 = +\$$	
						Copy	
				Total	\$ 750.00	total	750.00
are p		- such as a priority tax, child e of your bankruptcy case? '					
<b>■</b> Y		of all of these priority claims. D such as those you listed in line		current or			
	Total amount of all pas	st-due priority claims			\$ 33,000.00	• 60 \$	550.00
36. <b>Proje</b>	cted monthly Chapter 13 p				\$		
Office the Ex To find	e of the United States Courts xecutive Office for United State d a list of district multipliers that i	as stated on the list issued by for districts in Alabama and Nates Trustees (for all other district, go online using list may also be available at the b	North Carolina ricts). ng the link specit	or by	х	Copy total	
Avera	age monthly administrative e	kpense			\$	here=> \$	
	l all of the deductions for d lines 33e through 36.	ebt payment.				\$_	4,983.60
Total Dec	ductions from Income						
38. <b>Add a</b>	all of the allowed deduction	ıs.					
	y line 24, <i>All of the expenses</i> ense allowances	allowed under IRS	\$	3,310.40	) <del>-</del>		
Cop	y line 32, All of the additiona	l expense deductions	\$	921.00	<u>.</u>		
Сор	y line 37, All of the deduction	ns for debt payment	+\$	4,983.60			
Tota	al deductions		\$	9,215.00	Copy total here=	<b>=&gt;</b>	9,215.00

Debtor 1 Debtor 2	Gerald Lee Linda Kay I			C	ase num	ber (if known)		
Part 2:	Determine	Your Disposable Income Under 1	I U.S.C. § 1325(k	o)(2)				
		current monthly income from line ur Current Monthly Income and C			d.		\$	8,996.00
<b>ch</b> i dis rec	<b>Ildren.</b> The mo ability paymen eived in accor	nably necessary income you rece onthly average of any child support p ts for a dependent child, reported in dance with applicable nonbankrupto expended for such child.	ayments, foster of Part I of Form 12	care payments, or 22C-1, that you	\$	0.	.00	
em in 1	ployer withheld	ed retirement deductions. The more different wages as contributions for quint (b)(7) plus all required repayments S.C. § 362(b)(19).	alified retirement	plans, as specifie	d \$	0.	.00	
42. <b>To</b> t	al of all dedu	ctions allowed under 11 U.S.C. § 7	<b>707(b)(2)(A).</b> Cop	y line 38 here	=> \$	9,215.	.00	
exp the	enses and your	<b>pecial circumstances.</b> If special circ u have no reasonable alternative, de ou must give your case trustee a de ad documentation for the expenses.	escribe the specia	al circumstances a	ınd			
Descri	be the specia	l circumstances		Amount of exp	oense			
	Business e	xpense		\$ 4,07	74.00			
				\$		•		
				\$		-		
				Ψ				
			Total \$	4,074.00	Co her		4,074.00	
44. <b>To</b>	tal adjustmen	ts. Add lines 40 through 43.		=>	\$	13,289.00	Copy here=> -\$	13,289.00
45. <b>Ca</b>	lculate your n	nonthly disposable income under	<b>§ 1325(b)(2).</b> Su	btract line 44 from	line 39	9.	\$	-4,293.00
Part 3:	Change in	Income or Expenses						
hav tim you	ve changed or e your case wi u filed your pet	ne or expenses. If the income in Fo are virtually certain to change after t ill be open, fill in the information belo ition, check 122C-1 in the first colum, fill in when the increase occurred, a	the date you filed ow. For example, on, enter line 2 in	your bankruptcy p if the wages repor the second colum	cetition ted inc in, exp	and during the reased after		
Form	Line	Reason for change		Date of chang	je	Increase or decrease?	Amount of	change
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	D-2 D-1 D-2 D-1 D-2 D-1					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease	\$ \$ \$	

## Case 18-04175-LT13 Filed 07/13/18 Entered 07/13/18 16:28:51 Doc 1 Pg. 53 of 68

Debtor 1 Debtor 2	Gerald Lee Lowery Linda Kay Lowery		Case number (if known)
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that the inform	matio	n on this statement and in any attachments is true and correct.
-	/s/ Gerald Lee Lowery Gerald Lee Lowery Signature of Debtor 1	X	Linda Kay Lowery Signature of Debtor 2
	June 30, 2018 MM / DD / YYYY	Date	# June 30, 2018 MM / DD / YYYY

Debtor 1	Gerald Lee Lowery		
	Linda Kay Lowery	Case number (if known)	

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 01/01/2018 to 06/30/2018.

#### Line 4 - Contributions to household expenses of the debtor or dependents

Source of Income: Parents

Income by Month:

6 Months Ago:	01/2018	\$250.00
5 Months Ago:	02/2018	\$250.00
4 Months Ago:	03/2018	\$250.00
3 Months Ago:	04/2018	\$250.00
2 Months Ago:	05/2018	\$250.00
Last Month:	06/2018	\$250.00
	Average per month:	\$250.00

Debtor 1	Geraid Lee Lowery		
	Linda Kay Lowery	Case number (if known)	

### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 01/01/2018 to 06/30/2018.

#### Line 5 - Income from operation of a business, profession, or farm

Source of Income: Linda's Hair, Nails and Reflexology

Income/Expense/Net by Month:

_	Date	Income	Expense	Net
6 Months Ago:	01/2018	\$10,872.00	\$0.00	\$10,872.00
5 Months Ago:	02/2018	\$6,954.00	\$0.00	\$6,954.00
4 Months Ago:	03/2018	\$9,417.00	\$0.00	\$9,417.00
3 Months Ago:	04/2018	\$9,538.00	\$0.00	\$9,538.00
2 Months Ago:	05/2018	\$8,343.00	\$0.00	\$8,343.00
Last Month:	06/2018	\$7,352.00	\$0.00	\$7,352.00
_	Average per month:	\$8,746.00	\$0.00	
			Average Monthly NET Income:	\$8,746.00

Revised: 12/01/17

Name, Address, Telephone No. & I.D. No.

Brian A. Kretsch 159240 810 Jamacha Road, Suite 202 El Cajon, CA 92019 619-696-6629 159240 CA

#### UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA 325 West F Street, San Diego, California 92101-6991

In Re Gerald Lee Lowery Linda Kay Lowery

BANKRUPTCY NO.

Last four digits of Soc. Sec. or Debtor.

Individual-Taxpayer I.D. (ITIN)/Complete EIN: xxx-xx-6434/xxx-xx-6177

### UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA RIGHTS AND RESPONSIBILITIES OF CHAPTER 13 DEBTORS AND THEIR ATTORNEY

(Business Case)

It is important for debtors in Chapter 13 bankruptcy to understand their rights and responsibilities. It is also important that they know what their attorney's responsibilities are, and appreciate the importance of communicating with their attorney to make the case successful. Debtors can expect their attorney to provide certain services for them. And they should know the costs of attorneys' fees through the life of a plan. To assure that debtors and their attorney understand their rights and responsibilities in the bankruptcy process, the Bankruptcy Court has made the following rights and responsibilities binding on them under Local Bankruptcy Rule 1002-1(c) and General Order 180-A. (Nothing in this agreement should be construed to excuse an attorney from any ethical duties or responsibilities under any other applicable law.)

Debtors' attorneys can be paid in one of two ways: through guideline fees; or by formal fee application. The choice, agreed upon by the debtors and their attorney, must be made at the start of the representation. Once an attorney accepts any type of guideline fee in any amount, guideline fees will apply for the duration of the case. In this case, the attorney [check one]:

- will be paid guideline fees (subject to increase through a fee application only in atypical cases as discussed below).
- □ waives guideline fees and will instead prepare fee applications for all work done.

# UNLESS THE COURT ORDERS OTHERWISE, in every case – regardless of fee regime – the following rights and responsibilities apply:

#### The debtor must:

- 1. Provide accurate financial information.
- 2. Provide information in a timely manner.
- 3. Cooperate and communicate with the attorney.
- 4. Discuss with the attorney the debtor's objectives in filing the case.
- 5. Keep the trustee and attorney informed of the debtor's address and telephone number.
- 6. Inform the attorney of any wage garnishments or attachments of assets which occur or continue after the filing of the case.
- 7. Contact the attorney promptly if the debtor loses his/her job or has other financial problems.
- 8. Let the attorney know immediately if the debtor is sued before or during the case.
- 9. Inform the attorney if any tax refunds the debtor is entitled to are seized or not returned to the debtor by the IRS or Franchise Tax Board.

- 10. Contact the attorney before buying, refinancing, or selling real property or before entering in to any long-term loan agreements to find out what approvals are required.
- 11. Pay any filing fees and filing expenses that may be incurred directly to the attorney.
- 12. Pay appropriate attorney's fees commensurate with this agreement and the United States Bankruptcy Court Guidelines regarding Chapter 13 Attorney Fees. Any future increase or other change in "additional fees" under the guidelines will also automatically apply to this case until it is finally closed. If a court order is entered regarding attorney's fees, fees should be paid in accordance with the court's order.

# To receive \$4,400, which is within the United States Bankruptcy Court's parameters for "initial fees," the attorney must:

- 1. Meet with the debtor to review the debtor's assets, liabilities, income and expenses.
- 2. Analyze the debtor's financial situation, and render advice to the debtor in determining whether to file a petition in bankruptcy.
- 3. Counsel the debtor regarding the advisability of filing either a Chapter 7 or Chapter 13 case, discuss both procedures with the debtor, and answer the debtor's questions.
- 4. Explain to the debtor how the attorney's fees and trustee's fees are paid.
- 5. Explain what payments will be made directly by the debtor and when to make those payments, and what payments will be made through the debtor's chapter 13 plan (with particular attention to mortgage and vehicle loan payments, as well as any other claims with accrued interest).
- 6. Explain to the debtor how, when, and where to make the chapter 13 plan payments.
- 7. Explain to the debtor that the first plan payment must be made to the Trustee within 30 days of the date the plan is filed.
- 8. Advise the debtor of the requirement to attend the § 341(a) Meeting of Creditors, and instruct the debtor as to the date, time and place of the meeting.
- 9. Advise the debtor of the necessity of maintaining liability, collision and comprehensive insurance on vehicles securing loans or leases.
- 10. Timely prepare, file and serve the debtor's petition, plan, schedules, statement of financial affairs, and any necessary amendments thereto, which may be required.
- 11. Prepare a Questionnaire for Chapter 13 Business Owners.
- 12. Provide documents and information requested by the Chapter 13 Trustee and the Court, including, but not limited to, an itemized list of all business assets and a profit and loss statement for each of the three months prior to the filing.
- 13. Attend on-site inspections of business at the Chapter 13 Trustee's request.
- 14. Provide an executed copy of the Rights and Responsibilities of Chapter 13 Debtors and their Attorneys and a copy of the Court's Guidelines regarding Chapter 13 Attorney Fees to the debtor.
- 15. Appear and represent the debtor at the § 341(a) Meeting of Creditors and any confirmation hearings.
- 16. Respond to the objections to plan confirmation, and where necessary, prepare, file and serve an amended plan.
- 17. Assist the Debtor in performing duties pursuant to 11 U.S.C. § 1304, including but not limited to, the filing of periodic operating reports.
- 18. Provide Certification of Eligibility for Discharge pursuant to Local Bankruptcy Rule 4004-1.
- 19. Provide such other legal services as are necessary for the administration of the case before the Bankruptcy Court, which include, but are not limited to, a continuing obligation to assist the debtor by returning telephone calls, answering questions and reviewing and sending correspondence.

Additional services may be required, but are not included in the guideline "initial fees" of \$4,400. If necessary and when appropriate, the attorney, at the debtor's request and only with the debtor's cooperation, must provide the following services for "additional fees" described below:

- 1. Prepare, file and serve necessary modifications to the plan post-confirmation, which may include suspending, lowering or increasing plan payments.
- 2. Prepare, file and serve necessary motions to buy,sell or refinance real property and authorize use of cash collateral or assume executory contracts or unexpired leases.
- 3. Object to improper or invalid claims.
- 4. Represent the debtor in motions for relief from stay.

- 5. Prepare, file and serve necessary motions to avoid liens on real or personal property.
- 6. Prepare, file and serve necessary oppositions to motions for dismissal of case.
- 7. Provide such other legal services as are necessary for the administration of the case before the Bankruptcy Court, which include but are not limited to, presenting appropriate legal pleadings and making appropriate court appearances.

#### Should additional services be provided and "additional fees" requested, the attorney must:

- 1. Provide proper notice in accordance with Federal Rule of Bankruptcy Procedure 2002.
- 2. Advise the debtor of all "additional fees" requested and file a declaration with the court stating that counsel has so advised the debtor of the fees requested and the debtor has no objection to the requested fees.

The "Guidelines Regarding Chapter 13 Attorney Fees" provide for "additional fees" within the United States Bankruptcy Court's parameters in the following amounts and include all court appearances required to pursue described actions.

### **Modified Plan (Post-Confirmation)**

\$685

for fees and expenses for services rendered post-confirmation for opposing, preparing, filing, noticing, and attending hearings on any motion to modify debtor's plan under section 1329 of the Bankruptcy Code (including the preparation of amended income and expenses statements and providing proof of income). (These fees should be less for modification due to clerical error or other administrative issues.)

#### **Opposition to Motions for Relief from Stay**

\$500 (Personal property) for fees and expenses of all services rendered

**\$675** (**Real property**) in opposition to motions to modify or vacate automatic stay.

#### Obtaining Orders re: Sale or Refinance of Real Property

**\$570** (**By stipulation or** for fees and expenses of all services rendered for **noticed hearing**) order authorizing the sale or refinancing of real estate,

but not including loan modifications.

#### **Objections to Claim**

\$270 (Uncontested objections for fees and expenses of all services rendered for without hearing) preparing, filing and noticing objections to a claim. (Fees must not exceed 50% of the

with a hearing) amount the trustee would have otherwise paid.)

# Oppositions to Dismissal/Motions to Avoid Lien/

### **Loan Modifications/Other Routine Pleadings**

\$515

for fees and expenses of all services rendered for preparing, filing, noticing, and attending hearings in opposition to a motion to dismiss the case, for motions to avoid lien or to approve a loan modification, and for other routine pleadings.

# Motions to Value Real Property, Treat Claim as

### **Unsecured and Avoid Junior Lien (Lien Strips)**

\$655

for fees and expenses of all services rendered for preparing, filing, noticing, and attending hearings when there is opposition to a motion to value real property, treat claim as unsecured and avoid junior lien.

#### **Motions to Impose/Extend Automatic Stay**

\$390 (Unopposed) for fees and expenses for all services rendered for preparing, filing, noticing and attending hearings on motion to impose or extend the automatic stay.

#### **Novel and Complex Motions and Oppositions to Motions**

These types of motions and oppositions may be billed at hourly rates, and counsel must file a fee application in compliance with Federal Rules of Bankruptcy Procedure and Local Bankruptcy Rules 2002 and 2016.

#### Requirements for a fee application:

Once the attorney receives any guideline fee in the case, a later fee application must be based on atypicality. That requires showing that the case presented issues more difficult than those faced by Chapter 13 practitioners on a regular basis. *See Law Offices of David A. Boone v. Derham-Burk (In re Eliapo)*, 468 F.3d 592 (9th Cir. 2006). Filing a novel and complex motion, or opposing one, may meet that description. All fee applications must comply with applicable rules, including Federal Rules of Bankruptcy Procedure and Local Bankruptcy Rules 2002 and 2016, and all United States Trustee guidelines.

#### Debtor's objection to a fee application:

The debtor has the right to timely object to a fee application, and may be heard in connection with any other party's fee objection. If the debtor disputes the legal services provided or the fees charged by the attorney, the debtor may file an objection with the court and set the matter for hearing.

#### Dismissal or withdrawal of the attorney:

Any change of debtor's attorney must be approved by court order. This requirement applies to all substitutions and withdrawals of counsel, including where: (1) debtor seeks to discharge the attorney; (2) the attorney seeks permission to withdraw as counsel; and (3) debtor and their attorney file a stipulation to substitute or withdraw counsel.

#### Payment of fees:

By signing this document, debtor agrees that their attorney can be paid guideline fees in the amounts listed above, if guideline fees have been chosen. All post-filing fees will be paid through the plan unless either the court orders otherwise, or the attorney: (1) holds in their client trust account all additional fees paid by the debtor; (2) promptly discloses receipt of those fees; and (3) promptly seeks court approval. Such fees may be disbursed from the attorney's client trust account only after the court awards them. The bankruptcy judge has discretion in approving fees, and may allow less than the requested amount.

The initial guideline fee may not exceed \$4,400 in business cases. The initial fee charged in this case is \$_4,400.00_.

I acknowledge the foregoing.

Dated: June 30, 2018	/s/ Gerald Lee Lowery	
	Gerald Lee Lowery	
	Debtor	
Dated: June 30, 2018	/s/ Linda Kay Lowery	
	Linda Kay Lowery	
	Debtor	
Dated: June 30, 2018	/s/ Brian A. Kretsch	
Jacob F	Brian A. Kretsch 159240	
	Attorney for Debtor(s)	

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Southern District of California

In	re	Gerald Lee Lowe Linda Kay Lower				Case N	Jο.		
	-	Lilida Ray Lowel	у		Debtor(s)	Chapte		13	
			LOSURE OF COM			ORNEY FOR	DE	` ,	
1.	con	npensation paid to me	329(a) and Fed. Bankr. P. e within one year before the the debtor(s) in contemplation	e filing of the p	etition in bankruptc	y, or agreed to be p	aid t	o me, for services	
		For legal services, I	I have agreed to accept			\$		4,400.00	
		Prior to the filing of	f this statement I have rece	eived		\$		1,690.00	
		Balance Due				\$		2,710.00	
2.	The	source of the compe	ensation paid to me was:						
		Debtor	Other (specify):						
3.	The	source of compensa	tion to be paid to me is:						
		■ Debtor □	Other (specify):						
4.	-	I have not agreed to	share the above-disclosed	compensation	with any other perso	n unless they are n	nemb	ers and associates	s of my law firm.
			re the above-disclosed coment, together with a list of the						y law firm. A
5.	In 1	return for the above-c	disclosed fee, I have agreed	d to render lega	l service for all aspe	cts of the bankrupt	су са	ase, including:	
	b. c.	Preparation and filing	or's financial situation, and g of any petition, schedules e debtor at the meeting of c	s, statement of	affairs and plan whi	ch may be required	;	-	ankruptcy;
		The fee does If this case is hour or the C United States	a not include any services a Chapter 13 case, the Chapter 13 guidline among Trustee Southern Dispreyenated herein by ref	e fee is to be ount at the ti strict of Califo	set by the Bankr me of the applica	uptcy Court at the tion, whichever	he a is g	greed upon rat reater	-
6.	Ву	Representati	lebtor(s), the above-disclos on of the debtors in an versary proceeding.				ance	es, relief from s	tay actions or
				CERT	IFICATION				
thi		rtify that the foregoing ruptcy proceeding.	ng is a complete statement	of any agreeme	ent or arrangement f	or payment to me f	or re	presentation of th	e debtor(s) in
	June	e 30, 2018		_	/s/ Brian A. Kre				
	Date				Brian A. Kretsc Signature of Attor				
					Law Office of B	rian A. Kretsch,	APC		
					810 Jamacha R				
					El Cajon, CA 92 619-696-6629	UIB			
					brikretsch@sbo	global.net			
					Name of law firm				

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

B 201A Page 2

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B [07/08/13]

Name, Address, Telephone No. & I.D. No.

Brian A. Kretsch 159240

810 Jamacha Road, Suite 202

El Cajon, CA 92019
619-696-6629
159240 CA

UNITED STATES BANKRUPTCY COURT

SOUTHERN DISTRICT OF CALIFORNIA
325 West "F" Street, San Diego, California 92101-6991

In Re

Gerald Lee Lowery
Linda Kay Lowery

BANKRUPTCY NO.

# CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Debtor.

#### **Certification of Debtor**

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

Gerald Lee Lowery Linda Kay Lowery	${ m X}^{{}}$ /s/ Gerald Lee Lowery	June 30, 2018
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X /s/ Linda Kay Lowery	June 30, 2018
	Signature of Joint Debtor (if any	) Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification. B 201B

CSD 1008 [08/21/00]	
Name, Address, Telephone No. & I.D. No.	
Brian A. Kretsch 159240	
810 Jamacha Road, Suite 202	
El Cajon, CA 92019	
619-696-6629 159240 CA	
159240 CA	
UNITED STATES BANKRUPTCY COURT	· ·
SOUTHERN DISTRICT OF CALIFORNIA 325 West "F" Street, San Diego, California 92	2101-6991
In Re Gerald Lee Lowery	
Linda Kay Lowery	BANKRUPTCY NO.
-maa nay 20110. y	
	Debtor.
VERIFICATION	N OF CREDITOR MATRIX
DADEL ( I. J.	
PART I (check and complete one):	
Navy matition filed. Creditor dialectta magnined	TOTAL NO OF CREDITORS. 10
New petition filed. Creditor <u>diskette</u> required.	TOTAL NO. OF CREDITORS: 19
☐ Conversion filed on See instructions on reverse	side
Former Chapter 13 converting. Creditor diskette requ	
Post-petition creditors added. Scannable matrix requ	
☐ There are no post-petition creditors. No matrix requirements	
There are no post-pention creditors. No matrix requir	eu.
Amendment or Balance of Schedules filed concurrently with th	nis original scannable matrix affecting Schedule of Debts and/or Schedule of
Equity Security Holders. See instructions on reverse side.	ins original scannable matrix affecting schedule of beots and of schedule of
Names and addresses are being ADDED.	
□ Names and addresses are being DELETED	
□ Names and addresses are being CORRECT	
Traines and addresses are being corrected	LD.
PART II (check one):	
The above-named Debtor(s) hereby verifies that the list of cred	itors is true and correct to the best of my (our) knowledge.
	ost-petition creditors affected by the filing of the conversion of this case and that
the filing of a matrix is not required.	
	rald Lee Lowery
	d Lee Lowery
Signat	ure of Debtor
Date: June 30, 2018 /s/ Lin	da Kay Lowery
	Kay Lowery
	ure of Debtor
Signat	

#### Case 18-04175-LT13 Filed 07/13/18 Entered 07/13/18 16:28:51 Doc 1 Pg. 65 of 68

CSD 1008 (Page 2) [08/21/00]

#### **INSTRUCTIONS**

- 1) Full compliance with Special Requirements for Mailing Addresses (CSD 1007) is required.
- 2) A creditors matrix with Verification is required whenever the following occurs:
  - a) A new petition is filed. Diskette required.
  - b) A case is converted on or after SEPTEMBER 1, 2000. (See paragraph 4b concerning post-petition creditors.)
  - c) An amendment to a case on or after SEPTEMBER 1, 2000, which adds, deletes or changes creditor address information on the debtor's Schedule of Debts and/or Schedule of Equity Security Holders. Scannable matrix format required.
- 3) The scannable matrix must be <u>originally</u> typed or printed. It may not be a copy.
- 4) CONVERSIONS:
  - a) When converting a Chapter 13 case filed before SEPTEMBER 1, 2000, to another chapter, <u>ALL</u> creditors must be listed on the mailing matrix at the time of filing and accompanied by a <u>Verification</u>. Diskette required.
  - b) For Chapter 7, 11, or 12 cases converted on or after SEPTEMBER 1, 2000, only post-petition creditors need be listed on the mailing matrix. The matrix and Verification must be filed with the post-petition schedule of debts and/or schedule of equity security holders. If there are no post-petition creditors, only the verification form is required. Scannable matrix format required.
- 5) AMENDMENTS AND BALANCE OF SCHEDULES:
  - a) Scannable matrix format required.
  - b) The matrix with <u>Verification</u> is a document separate from the amended schedules and may not be used to substitute for any portion of the schedules. IT MUST BE SUBMITTED WITH THE AMENDMENT/BALANCE OF SCHEDULES.
  - c) Prepare a separate page for each type of change required: ADDED, DELETED, or CORRECTED. On the **REVERSE** side of each matrix page, indicate which category that particular page belongs in. Creditors falling in the same category should be placed on the same page in alphabetical order.
- 6) Please refer to CSD 1007 for additional information on how to avoid matrix-related problems.

Best Buy Credit Po Box 790441 St. Louis, MO 63179

Capital One PO Box 30285 Salt Lake City, UT 84130

Chase PO Box 15298 Wilmington, DE 19850

CIT Bank P.O. Box 7056 Pasadena, CA 91109

CIT Bank, NA 75 North Fair Oaks Ave Pasadena, CA 91103

Citibank/Citicard PO Box 6500 Sioux Falls, SD 57117

Comenity Bank bankruptcy Dept. Po Box 182125 Columbus, OH 43218-2125

Credit One Bank
P.O. Box 98873
Las Vegas, NV 89193-8873

Department of Treasury Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 GM Financial PO Box 183834 Arlington, TX 76096

Home Depot Credit Svcs PO Box 790328 St. Louise, MO 63179

Internal Revenue Service Insolvency Unit 880 Front Street, Rm 3220 San Diego, CA 92101

JCPenny PO Box 965009 Orlando, FL 32896

Kohl's PO Box 3043 Milwaukee, WI 53201

Merrick Bank PO Box 9201 Old Bethpage, NY 11804

Sunrun Installation 775 Fiero Ln, Ste 200 San Luis Obispo, CA 93401

Target National Bank 3901 West 53rd St Sioux Falls, SD 57106

Trustee Corps Foreclosure Dept. 17100 Gillette Avenue Irvine, CA 92614 Wells Fargo Card Svcs Po Box 10347 Des Moines, IA 50306